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SERIAL NUMBER 10/775,972	FILING DATE 02/10/2004 RULE	CLASS 435	GROUP ART UNIT 1642	ATTORNEY DOCKET NO. 210121.455C21
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/623,155 07/17/2003
 which is a CIP of 10/313,986 12/04/2002
 which is a CIP of 10/117,982 04/05/2002 ABN
 which is a CIP of 10/007,700 11/30/2001 PAT 6,960,570
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 which is a CIP of 09/662,786 09/15/2000 ABN
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** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/15/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	STATE OR COUNTRY WA	SHEETS DRAWING 0	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 3
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ADDRESS

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701 FIFTH AVE
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SEATTLE , WA
98104-7092

TITLE

Compositions and methods for the therapy and diagnosis of lung cancer

<p>FILING FEE RECEIVED 900</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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